



CITY OF DALLAS  
ETHICS ADVISORY COMMISSION

RESPONDENT FORM  
FOR PRELIMINARY PANEL

For Official Use Only

Please type or print legibly in blue or black ink

**NOTE: ANY PERSON WHO KNOWINGLY MAKES A FALSE RESPONSE TO A COMPLAINT MAY BE SUBJECT TO CRIMINAL PROSECUTION.**

**PART A – RESPONDENT INFORMATION**

1. Your full name (identifies you as the Respondent):

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2. Check the box that applies to you and fill in the applicable information:

- Elected official \_\_\_\_\_ (office held)
- Appointed official \_\_\_\_\_ (board/commission name)  
\_\_\_\_\_ (title/position held)
- Candidate \_\_\_\_\_ (office sought)
- City Employee \_\_\_\_\_ (title/position held)  
\_\_\_\_\_ (department)

3. Your residence address (Street, City, State, and Zip Code):

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4. Your business address (Street, City, State, and Zip Code):

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5. Preferred telephone number:

Cell Home Business (circle one)

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6. Additional telephone number:

Cell Home Business (circle one)

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**PART A – RESPONDENT INFORMATION, continued**

7. Your email address:

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**PART B – COMPLAINT INFORMATION**

I, THE RESPONDENT, RESPOND TO THE COMPLAINT FILED AGAINST ME BY THE FOLLOWING:

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1. Complainant's full name (print)

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2. Date of complaint

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**PART C -- YOUR RESPONSE**

The complaint filed against you will be considered by a preliminary panel of the Ethics Advisory Commission, as provided by Section 12A-26 of the Dallas City Code. To assist the preliminary panel, provide a statement below addressing **both** of the following questions:

1. Does the complaint state a claim under Chapter 12A of the Dallas City Code?
2. Is the complaint supported by just cause? ("Just cause" means such cause as is found to exist upon a reasonable inquiry that would induce a reasonably intelligent and prudent person to believe that a person has committed an act or acts constituting an ethical violation under Chapter 12A of the Dallas City Code.)

Attach extra sheets if more space is needed.

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I CERTIFY THAT I HAVE READ THIS RESPONSE, FULLY UNDERSTAND ITS CONTENTS, AND I DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF TEXAS THAT THE FOREGOING STATEMENTS AND EVIDENCE ARE TRUE AND CORRECT. I UNDERSTAND THAT A COPY OF THIS RESPONSE WILL BE SENT TO THE CHAIR OF THE ETHICS ADVISORY COMMISSION AND TO ALL PARTIES TO THE COMPLAINT, INCLUDING THE INDIVIDUAL WHO SUBMITTED THE COMPLAINT AGAINST ME. ALL PAPERS AND COMMUNICATIONS RELATING TO THIS COMPLAINT WILL BE TREATED AS CONFIDENTIAL UNLESS REQUIRED TO BE MADE PUBLIC BY THE PUBLIC INFORMATION ACT (CHAPTER 552, TEXAS GOVERNMENT CODE) OR OTHER APPLICABLE LAW.

\_\_\_\_\_  
Signature

Before me the undersigned authority, on this the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ personally appeared \_\_\_\_\_, known to me to be the person whose name is subscribed hereto, and being duly sworn stated that such facts are to his/her knowledge true and correct, or, to the best of his/her knowledge, are supported by credible evidence.

\_\_\_\_\_  
Notary Public

<NOTARY SEAL>

\_\_\_\_\_  
County, Texas

My Commission expires:  
\_\_\_\_\_

Should you have any questions concerning this form, please contact the City Secretary's Office, at (214) 670-3738 during regular business hours (8:15am – 5:15pm).

Upon completion of **ALL** sections of the response form, please hand deliver or send by certified mail with any attachments to:

Office of the City Secretary  
CITY HALL  
1500 Marilla Street – Suite 5DS  
Dallas, TX 75201